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**CDPH GUIDANCE ON PERSONAL PROTECTIVE EQUIPMENT TO BE
USED BY HEALTHCARE WORKERS DURING MANAGEMENT OF
PATIENTS WITH EBOLA VIRUS DISEASE (EVD)
IN CALIFORNIA HOSPITALS**

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On October 20, 2014, the Centers for Disease Control and Prevention (CDC) issued updated infection control guidance entitled: [“Guidance on Personal Protective Equipment To Be Used by Healthcare Workers During Management of Patients with Ebola Virus Disease During Management of Patients with Ebola Virus Disease \(EVD\) in U.S. Hospitals, Including Procedures for Putting On \(Donning\) and Removing \(Doffing\)”](http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html) (available at: <http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html>). Key features of this guidance include recommendations for enhancement of healthcare worker protection through:

- The use of an updated ensemble of personal protective equipment (PPE), including gloves, fluid-resistant or impermeable body coverings, hood, and eye* and respiratory protection* (Face shields not goggles) intended to prevent skin exposure and inhalation of infectious aerosols;
- The implementation of rigorous and repeated employee training on the correct use of PPE, particularly when removing (doffing) PPE;
- The use of a trained observer to ensure that PPE is donned, used, and doffed correctly; and
- The designation and management of specific areas for PPE donning and doffing.

The California Department of Public Health (CDPH) recognizes that the exposure risk of a healthcare worker in a hospital setting while caring for individuals with suspected or confirmed Ebola virus disease (EVD) is higher than the risk to the community at large. Therefore, to ensure optimal protection of healthcare workers, CDPH recommends the following:

- CDPH endorses the adoption by California healthcare facilities of the CDC guidance described above as a basic framework for California.

CDPH recommends the following for EVD patients in the in-patient hospital setting that differ from the CDC guidance:

- CDPH recommends airborne infection isolation for individuals with suspected or confirmed EVD.
- CDPH recommends the use of a respirator (e.g., N95 respirator, NIOSH approved) as a minimum standard for droplet precautions.
- CDPH recommends that when aerosol-generating procedures are conducted on hospitalized patients suspected or confirmed with EVD, powered air-purifying respirator (PAPR) should be used. For protection from EVD exposure, aerosol-generating procedures may include suctioning, intubation, and other procedures that generate aerosols, but should also be considered for any contact with bodily fluids (e.g., blood, vomit, feces) during the care of the patient and in the cleaning of the environment or equipment where aerosols may be generated.